



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Yasutoshi OKUNO et al.

Application No. 10/032,564

Filed: January 2, 2002

For: METHOD FOR FABRICATING  
SEMICONDUCTOR DEVICE

- ) Group Art Unit: 2823
- ) Examiner: Michelle Estrada
- ) Confirmation No. 5824
- ) Date: March 19, 2004

CERTIFICATE OF MAILING OR TRANSMISSION  
[37 CFR 1.8(a)]

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Signature: \_\_\_\_\_

Name: \_\_\_\_\_

## AMENDMENT

Mail Stop **AF**  
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Sir:

In response to the Office Action mailed December 24, 2003, please consider the amendments and remarks in connection with the above-identified application as follows.



Image

AF / 2823

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/032,564
		Filing Date	January 2, 2002
		First Named Inventor	Yasutoshi OKUNO et al.
		Group Art Unit	2823
		Examiner Name	Michelle Estrada
Total Number of Pages in This Submission		Attorney Docket Number	740819-725

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below): _____
<b>Remarks</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Donald R. Studebaker, Reg. No. 32,815 Nixon Peabody LLP 401 9 <sup>th</sup> Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	March 19, 2004

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